

SERIAL NUMBER 09/398,131	FILING DATE 09/17/99	CLASS 705	GROUP ART UNIT 2761	ATTORNEY DOCKET NO. COM675/96112
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RICHARD W. REICHERT, DALLAS, TX.

APPL

CONTINUING DOMESTIC DATA***

VERIFIED THIS APPLN IS A CON OF 08/961,652 10/31/97 now P1 537,412

371 (NAT'L STAGE) DATA***

VERIFIED

FOREIGN APPLICATIONS***

VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 10/07/99 ** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 25	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 3
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ADDRESS
BRENT A CAPEHART
HEAD JOHNSON & KACHIGIAN
228 WEST 17TH PLACE
TULSA OK 74119

TITLE

ON-LINE PHARMACY AUTOMATED REFILL SYSTEM

FILING FEE RECEIVED \$380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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CONFIRMATION NO. 9672

Bib Data Sheet

SERIAL NUMBER 13 398,131	FILING DATE 09/17/1999 RULE	CLASS 705	GROUP ART UNIT 3629	ATTORNEY DOCKET NO. COM675/96112
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APPLICANTS

RICHARD W. REICHERT, DALLAS, TX;

**** CONTINUING DATA *******

This application is a CON of 08/961,652 10/31/1997 PAT 5,970,462

**** FOREIGN APPLICATIONS *********IF RE-EXAMINED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ****

** 10/01/1999

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY TX	SHEETS DRAWING 25	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verifier Initials	Acknowledged	Examiner's Signature	Initials		

ADDRESS

ON-PAGE TECHNOLOGIES, INC.
 P.O. BOX 112383
 CARELLTON, TX 75011-2383

TITLE

ON-PAGE PHARMACY AUTOMATED REFILL SYSTEM

FILER FEE REMITTED 0	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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